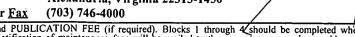
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4/should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590

10/21/2003

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/729,833	12/06/2000	Pei-Ren Jeng	4425-090	5660

TITLE OF INVENTION: METHOD FOR PATTERNING A DUAL DAMASCENE WITH RETROGRADE IMPLANTATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	01/21/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		•
LEE, HSIEN MING		2823	438-407000	_	-
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE

MACRONIX INTERNATIONAL C	O., LTD. Hsin-Chu	City, Taiwan, R.O.C.			
Please check the appropriate assignee category or cate	egories (will not be printed on the patent);	☐ individual			
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
☑ Issue Fee	☐ A check in the ame	☐ A check in the amount of the fee(s) is enclosed.			
☑ Publication Fee /	Payment by credit	№ Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies	The Director is he Deposit Account Nur	By The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number			
Director for Patents is requested to apply the Issue Fed		any previously paid issue fee to the application identified above.			
(Authorized Signature)	(Date) 01-20-04				
Benjamin J. Hauptman Reg.	No. 29,310				
NOTE; The sue Fee and Publication Fee (if requirements of the supplicant; a registered attorney or interest as shown by the records of the United States	uired) will not be accepted from anyone	01/23/2004 MMEKUNET 00000000 024222 (00220022			

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